

No 34 2nd 4th

An  
N. E. 8th & WalnutInaugural Dissertation  
On

Pneumonia Biliosa

by

Henry May

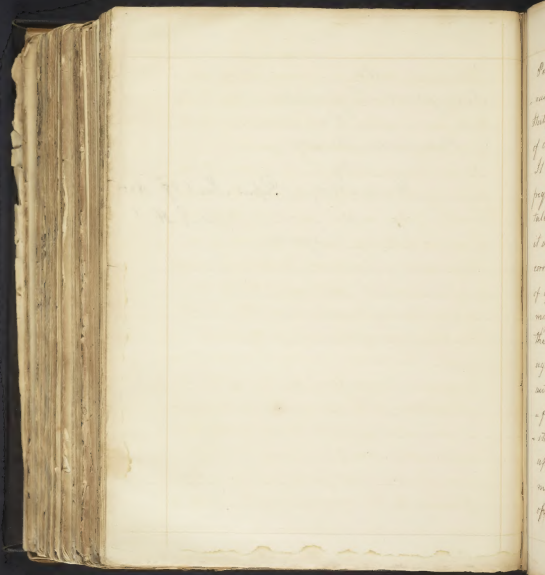
of

Virginia

Dated March 27<sup>th</sup> 1827

W. E. H.

Per



Pneumonia Biliosa is a disease, widely per-  
vading the whole southern section of the United  
States, and is endemic in all miasmatic districts  
of country; it is occasionally sporadic. —

It is a disease, which has, on account of its  
frequency and fatality, called forth the united  
talents of the medical world, in assigning  
it a true pathology and in indicating a  
correct mode of treatment. Whatever diversity  
of opinion, as to the pathology of this disease,  
may exist among practitioners of other States,  
the physicians of this are pretty well  
agreed. They consider it a combination of our  
autumnal bilious fever together with in-  
flammation of the Lungs. Indeed, the circum-  
stances, under which the disease makes its  
appearance, added to the symptoms and  
mode of treatment fully justify such an  
opinion. In the summer months, rising



the decomposition of vegetable & animal matters,  
there escapes a pestilential effluvia, the remote  
cause of Bilious fever: this effluvia lays the  
foundation for the disease, which may be re-  
-tained, without being roused into action till the  
fall or winter: when, on the presence of some  
one of the exciting causes of Pneumonia, such  
for instance, as cold or sleeping in damp sheets  
or intemperance or sudden vicissitudes of weather  
from hot to cold, checking perspiration and thereby  
throwing back on the lungs a quantity of blood  
and other fluids producing congestion of that  
organ, the compound disease of Bilious  
Pneumonia is produced. Whilst I admit that a  
predisposition to the disease may be contracted  
from some past intemperance of the atmosphere  
I am inclined to believe, that it proceeds more  
frequently from existing miasm. And why  
should this not be the case? There is, certainly,



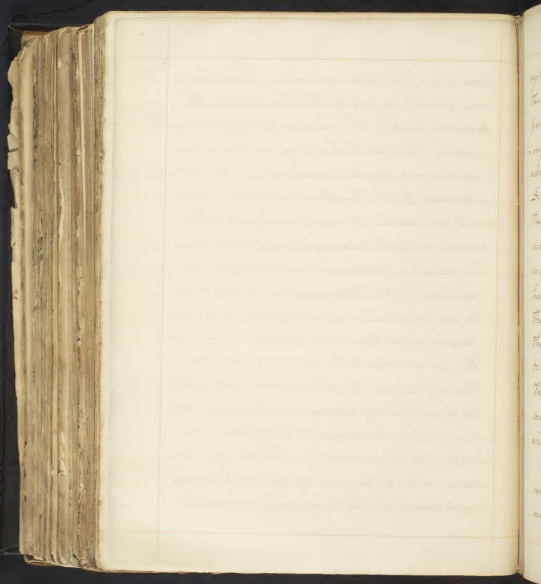
more or less decomposition of vegetable matters  
during the fall and winter. And did we not as-  
-met this, how would we account for the fact  
that after a comparatively healthy summer  
on the approach of autumn and winter  
the bilious fever has made its appearance  
in us menacing a form as at any other  
season of the year: as has been the case  
here for several winters past. It will scarcely  
be contended, that the predisposition was con-  
-tracted during the summer and escaped all  
the exciting causes then present, to be after-  
-wards roused into action when they are  
comparatively few —

Bilious Pleurisy commences late in autumn  
and disappears again on the approach of  
summer. It is observed to be most prevalent,  
when there existed during the preceding  
summer or at that time exists much bilious





fever. And those who have suffered from the one are generally subjects of the other disease. The labouring class of the community engaged in burning "Plant patches" as they are termed in Virginia, are subject to most violent bilious pleuritis. Is not the alternate exposure to high heats and severe colds sufficient to produce the disease, without recurring to any predisposition. The ground is prepared, in the winter, for the reception of the Tobacco seed by log fires. When the fire is once lit, it is not suffered to be extinguished until the whole surface has been burnt. This process frequently consumes a great part of the night; and the seed must be sown while the ground is dry & warm and before any rain or snow has fallen. A chill followed by high fever, hoarseness & accelerated respiration are sometimes the only symptoms. The disease, mistaken for a cold, is frequently, unfortunately,



[illegible]

The attack of *Leishmania* was a usually  
incurable by penicillin and other drugs. It  
was, however, the first of a series of attacks.



sway of the muscles or by a penton waste-  
less of energy and efficiency. I have  
seen the attack formerly mentioned.

It is induced in by a cold stage. In acquiring  
a few observations on the cold stage I shall  
find it to require some correspondence in the  
pathology and treatment of two cases. If I  
I shall but to what other men have  
come before me. I expect this must be  
"monism" to have shown him. When the first  
cold stage is a cold stage, just before reaching  
fever. In the chest of the same person  
is improved not complete until after the lapse  
of several days whether or not or not.  
In the third disease there is no cold stage.

The symptoms of the first disease which  
have been so accurately and frequently de-  
scribed by him are, a tracheal and laryngeal  
by both last night, I shall pay over in silence



it is more at times can expect to do  
nothing more than merely to enjoy them.  
The second division of symptoms more nearly to  
a general reaction than the latter and  
consequently of dangerous. The patient here  
is troubled with a heat and a burning, especially  
of the upper part of the chest. The cold  
is especially in the upper part of the body  
and the lower part of the body is affected. The  
pain is greatly increased by an attempt at  
a full inspiration or by a cough. I extend  
from the back and down to the chest  
to the clavicles. The work is by and  
backing on a three minutes or so intervals.  
There is an irregular motion of the chest  
on attempting a full inspiration. The in-  
spiration is not the proper amount and is  
interrupted or less and quick; more or  
less convulsive or spasm. The yellow-finger





Chills: urinary secretion scanty. If this  
febrile reaction be not speedily over,  
some other vital organ, as the Throat, Liver  
or Bowels will take an extension  
extending the constitutional symptoms  
in the course of these organs.

The next stage is an ague-like - it  
seems in all the dangerous symptoms in-  
dicating most violent and dangerous con-  
ditions. The patient is unable to sit  
impressions of pain, vertigo, confusion in  
sight, with nausea - a tremor, dull and  
heavy eye; with violent action in the carotid  
and temporal arteries whilst the pulse at the  
wrist is small & weak. Respiration slow and  
uneven, with a hoarse rattling cough, ap-  
-tation, of some sputa. The tongue is  
encrusted over with a dry black substance  
or smoothly and polished. The skin cold



and convulsion except about the head and neck  
where it is hot and dry, or covered over with  
a cold clammy sweat. At such times the  
supplied or greater secretion of the  
is particularly subject to a temporary and  
obstructive condition. In this case the  
most division, the impediment being the  
congestion in specific removed or into itself  
to other organs. When this is accomplished a  
counteractive change in the pathological condi-  
tion of the system is produced. Reaction becomes  
more general and the lost functions of the  
system is restored, as is exemplified by the  
patients now compensating of past febrile  
The disease generally runs its course  
3 to 15 days after the attack. A comparison  
of the symptoms in the above cases is follow-  
= able. A very common, however, and some of  
the most dangerous symptoms usually



precede death. The critical symptoms are  
copious expectoration such as from emaciation  
from the bowels, increased secretion of urine  
with a general yellow and moisture of the  
whole surface —

#### Treatment.

The general plan of treatment, is a combination  
of the following for bilious fever and for simple  
Pneumonia.

In all critical diseases it is frequently neces-  
sary to attend to the free action of the  
different excretory organs and to change their  
products. Inasmuch, that when this reflects  
the patient may be said to be doing well. In  
bilious fevers the secretion and excretion of  
bile is most important. In pneumonia  
the remark applies most forcibly, in a more  
or less degree, to the secretion and excretion.  
In the combination before us, they are all









probably produce the same effect. We  
then have a case of simple business  
to manage; and by a judicious use of paper,  
less dimensional concentration to remove undue  
market congestions, the income will shoot up  
quite. It is a case of simple business to manage.

After we returned home we found the  
 weather a little better. The rain was  
 not so heavy as yesterday. The  
 morning was very warm and the sun was  
 shining. The water was very warm and  
 the birds were singing. The children  
 were very happy and played for hours.  
 The weather was very good and the  
 children were very happy. The  
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 and the children were very happy.











In this sense, there is a great difference in  
the information & value of the two  
sorts of news which must be given to a religious  
superintendent both here & elsewhere.

The former is in the third degree where  
there is no remaining act but it is still subject  
in doubt and uncertainty. It is not some one  
telling that it is a fact but an internal  
and external stimulation & action, then comes  
the use of their intelligence. They are uncertain  
they sometimes measure the strength  
of the feeling which causes the operation  
of their remedies. One man's experience here  
is farther time; where there is more confidence  
and with a little experience, it is more  
to be trusted in it is more a matter of  
the mind and the matter of the  
a partial reaction. The same time  
and see, however, the same is the

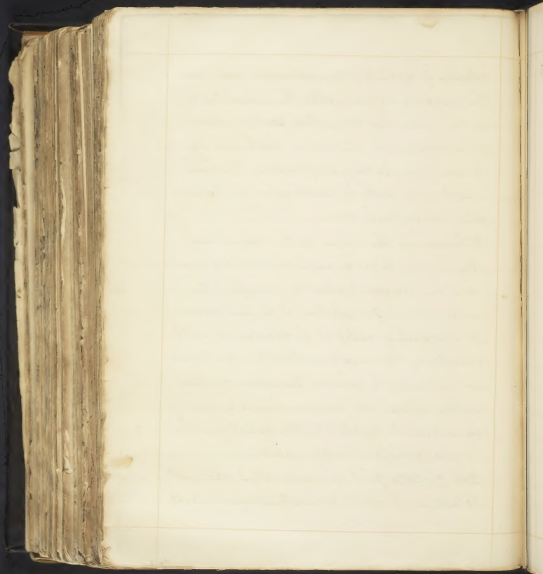




extensively applied to the extremities and over the Epigastria region. After the susceptibility of the system has been restored, reaction should be encouraged by the warm bath and by warm stimulating diaphoretics. The case must afterwards be treated upon the principles already laid down.

Whenever in the course of the disease any other organ takes on inflammation, we should direct our remedies to arrest the progress of the inflammation. For whether it be symptomatic or idiopathic, unless it be checked, it will inevitably terminate in death. And, whilst we endeavour to remove the cause of the inflammation, our remedies should at the same time, be applied to the relief of the organ, <sup>symptomatically</sup> affected. —

The ~~diagnostic~~ <sup>diagnostic</sup> part of treatment, I need not detail, as it will obviously suggest itself



to the discriminating practitioner. —

